

RECEIVED
CENTRAL FAX CENTER
AUG 02 2005

PTO/SB/80 (12-03)

Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby appoint:

☒ Practitioners associated with the Customer Number:

28120

OR

☐ Practitioner(s) named below (If more than ten patent practitioners are to be named, then a customer number must be used):

Name	Registration Number

as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).

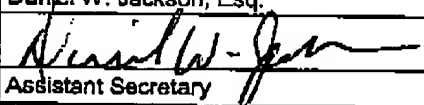
Assignee Name and Address:

Travelers Property Casualty Corp.

A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/86 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.

SIGNATURE of Assignee of Record

The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

Name	Daniel W. Jackson, Esq.		
Signature		Date	9/24/2009
Title	Assistant Secretary	Telephone	(860) 277-4012

PTO/SB/08 (08-03)
Approved for use through 07/31/2008. OMB 0861-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: Mark J. Stender

Application No./Patent No.: 09/843841

Filed/Issue Date: April 30, 2001

Entitled: SYSTEM AND METHOD FOR PROVIDING WEB-BASED USER INTERFACE TO LEGACY, PERSONAL-LINES INSURANCE APPLICATIONS

Travelers Property Casualty Corp.
(Name of Assignee)

a corporation
(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.

The extent (by percentage) of its ownership interest is _____ %
in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 012292, Frame 0086, or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

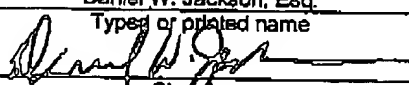
1. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
2. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
3. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

- ☐ Copies of assignments or other documents in the chain of title are attached.
[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

9/24/04
Date
(860) 277-4012
Telephone Number

Daniel W. Jackson, Esq.
Typed or printed name

Signature
Assistant Secretary, Travelers Property Casualty Corp.
Title

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: 10/4/04 8/4/05 Signature: Joanne Ryan (Joanne Ryan)

9542728.1

PTO/SB/122 (04-05)

Approved for use through 07/31/2008. OMB 0851-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CHANGE OF CORRESPONDENCE ADDRESS Application Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	09/843841
	Filing Date	April 30, 2001
	First Named Inventor	Mark J. Stender
	Art Unit	2166
	Examiner Name	Not Yet Assigned
	Attorney Docket No.	SPLT-P01-001

Please change the Correspondence Address for the above-identified application to:

☒ The address associated with Customer Number: 28120

OR

<input type="checkbox"/> Firm or Individual Name	ROPER & GRAY LLP				
Address	One International Place				
City	Boston	State	MA	Zip	02110-2624
Country	US				
Telephone	(617) 951-7000		Email		

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

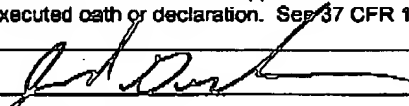
I am the:

☐ Applicant/Inventor

☐ Assignee of record of the entire interest.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ Attorney or agent of record. Registration Number 54,130

☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Signature 

Typed or Printed Name Edward A. Gordon

Date August 2, 2005 Telephone (617) 951-7066

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of 1 forms are submitted.

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below.

Dated: 8/2/05 Signature: Joanne Ryan (Joanne Ryan)

9785787.1